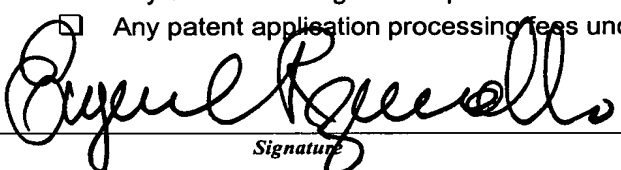
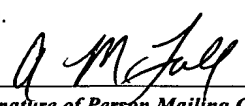



2876

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>			<b>Docket No.</b> 43581.010400		
<b>Applicant(s): Shraga Rotten</b>					
<b>Serial No.</b> 09/787,034	<b>Filing Date</b> March 12, 2001	<b>Examiner</b> Karl D. Frech	<b>Group Art Unit</b> 2876		
<b>Invention:</b> FETO-MATERNAL CALENDAR CALCULATOR					
<b>TO THE COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application. <input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted. <input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed. The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	<b>CLAIMS REMAINING AFTER AMENDMENT</b>	<b>HIGHEST # PREV. PAID FOR</b>	<b>NUMBER EXTRA CLAIMS PRESENT</b>	<b>RATE</b>	<b>ADDITIONAL FEE</b>
TOTAL CLAIMS	13 -	20 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$42.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1561 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 _____ <i>Signature</i>			Dated: 11/13/03		
Eugene Rzucidlo Reg. No. 31,900 Greenberg Traurig LLP 885 Third Avenue New York, NY 10022 (212) 801-2146			<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on 11/13/03 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align: center;"> _____ <i>Signature of Person Mailing Correspondence</i></p><p style="text-align: center;">Amy McFall _____ <i>Typed or Printed Name of Person Mailing Correspondence</i></p></div>		
<div style="text-align: center;"> 32361 PATENT TRADEMARK OFFICE</div>					
cc:					